PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

03500.017556

CLAIMS AS FILED - PART I (Column 1)						(Column 2)		SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY												
TOTAL CLAIMS			1.1 1				Γ	RATE	FEE		RATE	FEE											
FOR			NUMBER FILED		NUMBER EXTRA		В	ASIC FEE	375.00	OR	BASIC FEE	750.00											
то	TAL CHARGEA	BLE CLAIMS	2 17 minus 20=		* 17			X\$ 9=		OR	X\$18=	72											
IND	EPENDENT CL	AIMS	'		* 1			X42=		OR	X84=	67											
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=	ì											
* If the difference in column 1 is less than zero, ente					"0" in c	column 2	_	TOTAL		OR	TOTAL												
	C	LAIMS AS A	MENDED	D - PART II			· · · · · · · ·				OTHER THAN												
_		(Column 1) CLAIMS		(Colur		(Column 3)	· _ ·	SMALL E		OR	SMALL												
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE											
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=												
	Independent	*	Minus	***	CL AINA	=		X42=		OR	X84=												
<u> </u>	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	PENDEN	CLAIM	الحاا		+140=		OR	+280=												
								TOTAL		OR	TOTAL												
		,AD	DIT. FEE			ADDIT. FEE																	
AMENDMENT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Colur HIGH NUM PREVIO PAID	IEST BER OUSLY	PRESENT EXTRA	Γ	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE											
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=												
	Independent	*	Minus	***		=		X42=		OR	X84=												
Ľ	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT	CLAIM			+140=		OR	+280=												
											TOTAL												
(Oalume d)								ADDIT. FEE			ADDIT. FEE												
AMENDMENT C		(Column 1) CLAIMS REMAINING		(Colur HIGH NUM	IEST	(Column 3) PRESENT	Г	- 1	ADDI-			ADDI-											
		AFTER AMENDMENT		PREVIO PAID	DUSLY	EXTRA	RATE		TIONAL FEE		RATE	TIONAL FEE											
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=												
	Independent	*	Minus	***	5 01 4114	=		X42=		OR	X84=												
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=			+280=												
*	f the entry in colu	mn 1 is less than th	ne entry in colu	ımn 2, write	€ "0" in co	lumn 3.	L	TOTAL		OR	TOTAL												
***	If the "Highest Nu	mber Previously P	aid For" IN TH	IS SPACE	is less tha	an 3, enter "3."	AD	DIT. FEE	ropriate box		** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												